10/531,846 Application Number TRANSMITTAL Filing Date 9/28/2005 **FORM** First Named Inventor Sanjai Saxena Art Unit 1651 Examiner Name Irene Marx (to be used for all correspondence after initial filing) Total Number of Pages in This Submission Attorney Docket Number 4544 - 051198

ENCLOSURES (check all that apply)											
Fee Transmittal F	Form		Drawing(s)			After Allowance communication o TC					
Fee Attach	ed		Licensing-related	l Papers		Appeal Communication to Board of Appeals and Interferences					
Amendment / Reply			Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)						
After Final			Petition to conve Provisional Appl			Proprietary Information					
Affidavits/	declaration(s)		Power of Attorned Change of Corred Address			Status Letter					
Extension of Time Request		Terminal Disclaimer			Other Enclosure(s) (please identify below):						
Express Abandonment Request		Request for Refund									
Information Disclosure Statement		CD, Number of CD(s)									
			Landscape 7	Γable on CD							
Certified Copy of Priority		Remarks									
Document(s)											
Reply to Missing Parts/ Incomplete Application											
Reply to Missing Parts											
Under 37 CFR 1.52 or 1.53											
The Commissioner for Patents is hereby authorized to charge any additional fees or underpayment of fees under 37 CFR 1.16 and 1.17 to Deposit Account No. 23-0650.											
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT											
Firm Name	Firm Name The Webb Law Firm										
Signature Much K. Mox											
Printed Name	Michele K. Yoder										
Date	June 20, 2008			Reg. No.	11562						
CERTIFICATE OF TRANSMISSION / MAILING											
I hereby certify that this correspondence is being electronically transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:											
Signature Floren P. Trevethon											
Typed or printed name Florence P.		revethan			Date	June 20, 2008					

Effective on 12/08/2004.					Complete if Known								
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).								, , , , , , , , , , , , , , , , , , , ,					
FEE TRANSMITTAL					Application Number 10/531,								
For FY 2008					g Date Named Inventor	9/28/2005							
					niner Name	Sanjai San Irene Mar							
Applicant claims small entity status. See 37 CFR 1.27						1651	aix						
TOTAL AMOUNT O	F PAYME	NT (\$)	1050.00		Art Unit 1651 Attorney Docket 4544 - 051198								
Total Date of the state of the													
METHOD OF PAYMENT (check all that apply)													
Check Credit Card Money Order Other (please identify):													
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:													
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)													
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee													
	e any additio 37 CFR 1.16	nal fee(s) or und and 1.17	lerpayments	of fee(s)	✓ Credit any	overpayment	ts						
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.												
FEE CALCULATION	N (All the fe	es below are d	lue upon fi	ling or ma	y be subject to a s	surcharge.)							
1. BASIC FILING, S	EARCH, A	ND EXAMIN	ATION FE	ES									
	FILIN	G FEES	SEAR	CH FEES	EXAMINA	TION FEES							
		Small Entity Sma			-	mall Entity							
Application Type	Fee (\$)	<u>Fee (\$)</u>	<u>Fee (\$)</u>	Fee (\$)	<u>Fee (\$)</u>	Fee (\$)	Fees P	<u>aid (\$)</u>					
Utility	310	75	510	255	210	105		····					
Design	210	105	100	50	130	65	***************************************						
Plant	210	105	310	155	160	80							
Reissue	310	155	510	255	620	310							
Provisional	210	105	0	0	0	0							
2. EXCESS CLAIM	FEES							Small Entity					
Fee Description							<u>Fee (\$)</u>	Fee (\$)					
Each claim over 20 (in	_	-					50	25					
Each independent clair		cluding Reissue	es)				210	105					
Multiple dependent cla		7. 01.	, ,,,	(4)	77 70-14 (0)		370	185					
	20 or HP 20	Extra Clai		<u>ee (\$)</u>	<u>Fee Paid (\$)</u> = 0		Fee (\$)	ependent Claims Fee Paid (\$)					
HP = highest number of			X han 20.				<u>ree (3)</u>	ree raid (3)					
J	•			?aa (\$)	Fee Paid (\$)		****	-					
Indep. Claims - 3	<u>3 or HP</u> 3	Extra Clai	uns r	<u>ree (\$)</u>	= 0								
HP = highest number of	_												
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).													
<u>Total Sheets</u> - 100	<u>Extra S</u>				ditional 50 or frac		<u>f Fee (\$)</u> x =	Fee Paid (\$)					
4. OTHER FEE(S)	4. OTHER FEE(S) Fees Paid (\$)												
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 3 month Petition for Extension of Time fee													
SUBMITTED BY													
Signature	////CACO / (Finomogragom)												
Name (Print/Type)	Name (Print/Type) Michele K. Yoder /							Date June 20, 2008					